


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N06000012428		
1. Entity Name UNIFIED MISSIONARY BAPTIST CHURCH, INC.		

Principal Place of Business 3060 LENOX AVENUE JACKSONVILLE, FL 32205	Mailing Address 3060 LENOX AVENUE JACKSONVILLE, FL 32205
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2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
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City & State Zip	City & State Zip	Country	Country
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6. Name and Address of Current Registered Agent EDWARDS, LAKECIA 9126 12TH AVENUE JACKSONVILLE, FL 32208	
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FILED
07 SEP 17 PM 3:38
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



4. FCI Number 571240019	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	FL Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing) DATE _____

Filing Fee is \$61.25 Due by September 14, 2007	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees	Make check payable to Florida Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
Sunder/ Pastor Nelson B. Turpin 7503 Impala Ln. 32210		8127 Hillview Ct. Jacksonville, FL 32210	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	Co-Pastor Cornell Denson 8127 Hillview Ct. Jacksonville, FL 32208	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
Church Clerk/ Sec Lakecia Edwards 9126 12th Ave Jacksonville, FL 32208		11507 Teri Ln Jacksonville, FL 32218	
Treasurer Trinett Edwards 3700 University Club Rd. # 1008 Jacksonville, FL 32277	<input type="checkbox"/> Delete	8121 Cocoa Ave Jacksonville, FL 32211	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
Financial Secretary Deborah Gray 2399 Justin Rd 32210	<input checked="" type="checkbox"/> Delete	Thelma McClendon 10210 Haverford Rd. Jacksonville, FL 32218	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
Historian Mary Outin 3620 Antar Ridge Ln. Jacksonville, FL 32218	<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Nelson B. Turpin NELSON B. TURPIN 9/12/07
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #